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## TRADEM **DECLARATION FOR UTILITY OR DESIGN** PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))

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Attorney Docket Number	
First Named Inventor	Lampson, Bert C.
COMP	LETE IF KNOWN
Application Number	10/797,262
Filing Date	
Art Unit	
Examiner Name	

	require	ed)					
I hereby declare that:							
Each inventor's residence,	mailing address,	and citizenship are a	as stated b	elow next to t	heir name.		
I believe the inventor(s) nar which a patent is sought or			inventor(s	) of the subjec	ct matter wh	nich is clain	ned and for
RNA-DEPENDENT	DNA POLYM	MERASE FROM	1 GEOB	AÇILLUS	STEAR	OTHERN	10PHILUS
		,					
the specification of which		(Title of the	Invention)				
is attached hereto							
OR	r		7				
was filed on (MM/DI	D/YYYY)		as Uni	ted States Ap	plication Nu	ımber or P	CT International
Application Number		and was amended	]/MM) no b	OD/YYYY)			(if applicable).
I hereby state that I have re amended by any amendme			of the abo	ve identified s	pecification	n, including	the claims, as
I acknowledge the duty to	, ,		rial to nate	entability as o	defined in 3	37 CFR 1.	56. including for
continuation-in-part applica and the national or PCT into	tions, material inf	formation which bed	came avail	able between	the filing o	date of the	prior application
I hereby claim foreign prio	rity benefits unde	er 35 U.S.C. 119(a)	)-(d) or (f),	, or 365(b) of	any foreig	n applicati	on(s) for patent,
inventor's or plant breeder' country other than the Unit	s rights certificate	e(s), or 365(a) of an	y PCT inte	ernational app	lication wh	ich designa	ated at least one
application for patent, inver	tor's or plant bre	eder's rights certifica	ate(s), or a	ny PCT interi	national ap	olication ha	ving a filing date
before that of the application  Prior Foreign Application		y is claimed.  Foreign Filing	Date	Prior	ritv	Certified (	Copy Attached?
Number(s)	Country	(MM/DD/YY		Not Cla		Yes	No
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Additional foreign appli	cation numbers a	re listed on a supple	emental pri	iority data she	et PTO/SB	/02B attacl	ned hereto.

[Page 1 of 2]

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## **DECLARATION** — Utility or Design Patent Application

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Name Donna J. Russell									
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City				State	;				ZIP
Nashville				TN					37201
Country		Telephone	е			Fax			
US		615-726-5	5681			615-7	744-568	1	
I hereby declare that all statem and belief are believed to be statements and the like so made false statements may jeopardize	true; and furt de are punishat	ther that tole by fine	hese stat or impriso	ement onmen	s were	e made	with the	the kno	wledge that willful false
NAME OF SOLE OR FIRST IN	VENTOR:		Дар	etition	has be	en filed	I for this	s unsign	ned inventor
Given Name					T F	amily N	Jame		
(first and middle [if any]) Bert C.					°	or Surna	ame Lam	pson	
Inventor's	J								Date / /
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NAME OF SECOND INVENTO	R:				A pe	etition h	as bee	n filed fo	or this unsigned inventor
Given Name					Fa	amily Na	ame		
(first and middle [if any]) Jashree					or	Surnar	neelore		
Inventor's Signature What was	بيور								3/11 (04.
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Kingsport	TN				37664			US	
Additional inventors or a legal re	presentative are bein	ng named on	thes	uppleme	ental she	et(s) PTC	/SB/02A	or 02LR a	attached hereto.

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Application Number	
Filing Date	
First Named Inventor	Lampson, Bert C.
Title	RNA-Dependent DNA Polymerase
Art Unit	
Examiner Name	
Attorney Docket Number	

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Donna J. Russell				46,252	
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Firm or Individual Name	Donna J. Russell				
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Telephone	615-726-5681	Fax	615-	744-5681	
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Applicant/Inventor.					
	the entire interest. See 37 CFR 3.71. FR 3.73(b) is enclosed. (Form PTO/SB/	96)			· · · · · · · · · · · · · · · · · · ·
	SIGNATURE of Applican	t or Assignee	of Red	ord	
Name Bert C. Lampson					
Signature 730 7	[ C. Jampson				
Date 3/9/64	0 1			Telephone	
NOTE: Signatures of all the inventor forms if more than one signature is	rs or assignees of record of the entire interest required, see below*.	or their represer	tative(s)	are required. Su	bmit multiple
*Total of3	forms are submitted.				

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Application Number		
Filing Date		
First Named Inventor	Lampson, Bert C.	
Title	RNA-Directed DNA Polymerase	
Art Unit		
Examiner Name		
Attorney Docket Number		

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I hereby appoint:				
Practitioners associated	with the Customer Number:			
OR				
Practitioner(s) named be	elow:			
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Donna J. Russell			46,25	52
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Firm or Individual Name	Donna J. Russell			
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Country	Us			
Telephone	615-726-5681	Fax	615-744-5681	
	the entire interest. See 37 CFR 3.71. FR 3.73(b) is enclosed. (Form PTO/SB/S	96)		
	SIGNATURE of Applicant	•	of Record	
Name Jashree Velore			***	
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NOTE: Signatures of all the inventor forms if more than one signature is	rs or assignees of record of the entire interest or	or their representa	ative(s) are required. S	Submit multiple
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and	Title	RNA-Dire	cted DNA Polymerase
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The address associated with the above-mentione:  OR  The address associated with Customer Number:  OR  Firm or Individual Name Address Baker, Donelson, Bearman Address City Nashville Country US Telephone 615-726-5681  em the: Applicant/Inventor.  Assignee of record of the entire interest. See 37 (2) Stetement under 37 CFR 3.73(b) is enclosed. (Fc. SIGNATURE)  ame Dr. Michael L. Woodruff, Exegutive Dirgeter, Engineture	or the above-Identified application of Customer Number:  In, Caldwell & Borkowitz, P.C.  Ite 1000  State  Fax  Fax  FR 3.71.  Im PTO/SB/96)  of Applicant or Assignee  TSU Research Foundation	TN 615-744-5681  of Record	Zip   37201

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